B1 (Official )			United Sou		S Bankı District			ourt				Vol	untary	Petition
	ebtor (if ind <b>Jennifer</b> l		er Last, First,	Middle):				Name	of Joint De	ebtor (Spouse	) (Last, First	, Middle):		
(include mar	all Other Names used by the Debtor in the last 8 years include married, maiden, and trade names):  FKA Jennifer Peel							used by the J maiden, and			3 years			
(if more than one	e, state all)	Sec. or Indi	vidual-Taxpa	nyer I.D. (	(ITIN)/Com	plete El	IN	Last fo	our digits o	f Soc. Sec. or	Individual-	Гахрауег I.	D. (ITIN) N	o./Complete EIN
Street Addre	xxx-xx-1940 Street Address of Debtor (No. and Street, City, and State): 207 West 12th Johnston City, IL					Street	Address of	Joint Debtor	(No. and St	reet, City, a	and State):			
County of P	lasidanaa ar	of the Drin	cipal Place o	f Ducinas		ZIP ( <b>62951</b>		Count	y of Pacida	ence or of the	Dringing Di	ace of Rusi	nace:	ZIP Code
Williams		of the Princ	cipai Piace o	Dusines	S.			Count	y of Reside	ince of of the	rinicipai ri	ace of Busi	ness.	
Mailing Add	dress of Deb	otor (if diffe	rent from str	eet addres	ss):			Mailin	g Address	of Joint Debt	or (if differe	nt from stre	eet address):	
					_	ZIP (	Code							ZIP Code
Location of a								<u> </u>						
(Form		f Debtor	one hov)		Nature (Check	of Busin				•	of Bankrup Petition is Fi			ch
(Form of Organization) (Check one box)  ■ Individual (includes Joint Debtors)  See Exhibit D on page 2 of this form.  □ Corporation (includes LLC and LLP)  □ Partnership  □ Other (If debtor is not one of the above entities, check this box and state type of entity below.)			☐ Health Care Business ☐ Single Asset Real Estate as defi in 11 U.S.C. § 101 (51B) ☐ Railroad ☐ Stockbroker ☐ Commodity Broker ☐ Clearing Bank ☐ Other		fined	Chapt Chapt Chapt Chapt Chapt	er 7 er 9 er 11 er 12	☐ Cl of ☐ Cl of	hapter 15 P a Foreign hapter 15 P	Petition for R Main Proced Petition for R Nonmain Pr	eding Recognition			
Country of de Each country by, regarding	ebtor's center	oreign procee	eding	unde	Tax-Exe (Check box tor is a tax-ex er Title 26 of e (the Interna	k, if appli kempt org the Unit	icable) ganization ed States		defined "incurr	are primarily co d in 11 U.S.C. § red by an indivi- onal, family, or	onsumer debts, § 101(8) as idual primarily	for		s are primarily ess debts.
attach sign debtor is u Form 3A.	g Fee attached to be paid in ned application unable to pay waiver requ	n installments on for the cou fee except in	heck one boy (applicable to urt's considerat n installments.  able to chapter urt's considerat	individual ion certifyi Rule 1006 7 individu	ing that the (b). See Office als only). Mu	t Ch	Debto	or is a snor is not or's aggress than Sphicable and is being sphances of	regate nonco \$2,490,925 (constant) boxes: ag filed with of the plan w	debtor as definess debtor as on the nest debtor as of the nest deb	defined in 11 U ated debts (exc to adjustment	C. § 101(51I J.S.C. § 101 Cluding debts	(51D).  s owed to inside and every three	ders or affiliates) ee years thereafter) editors,
Debtor e	estimates that	nt funds will nt, after any	ation be available exempt prop for distribut	erty is ex	cluded and	adminis			es paid,		THIS	SPACE IS	FOR COURT	USE ONLY
Estimated N  1- 49	Tumber of C 50- 99	reditors  100- 199		1,000- 5,000	5,001- 10,000	10,001 25,000		,001- ,000	50,001- 100,000	OVER 100,000				
Estimated A  \$0 to \$50,000	\$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001 to \$1	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000 to \$100 million			\$500,000,001 to \$1 billion					
Estimated Li  \$0 to \$50,000	\$50,001 to \$100,000	\$100,001 to \$500,000	\$500,001	\$1,000,001 to \$10 million	\$10,000,001 to \$50 million	\$50,000 to \$100 million		\$500	\$500,000,001 to \$1 billion					

Case 14-40461-lkg Doc 1 Filed 04/28/14 Page 2 of 52

BI (Official For	III 1)(04/13)		rage 2		
Voluntar	y Petition	Name of Debtor(s): Norris, Jennifer N.			
(This page mu	st be completed and filed in every case)	0.77			
Location	All Prior Bankruptcy Cases Filed Within Last	Case Number:			
Where Filed:	- None -		Date Filed:		
Location Where Filed:		Case Number:	Date Filed:		
Pe	nding Bankruptcy Case Filed by any Spouse, Partner, or	Affiliate of this Debtor (If more th	nan one, attach additional sheet)		
Name of Debt - None -	or:	Case Number:	Date Filed:		
District:		Relationship:	Judge:		
	Exhibit A		Exhibit B		
forms 10K a pursuant to S	oleted if debtor is required to file periodic reports (e.g., nd 10Q) with the Securities and Exchange Commission Section 13 or 15(d) of the Securities Exchange Act of 1934 sting relief under chapter 11.)	I, the attorney for the petitioner nan have informed the petitioner that [h 12, or 13 of title 11, United States C	and whose debts are primarily consumer debts.)  and in the foregoing petition, declare that I are or she] may proceed under chapter 7, 11, 20de, and have explained the relief available artify that I delivered to the debtor the notice		
☐ Exhibit	A is attached and made a part of this petition.	X /s/ Brad Olson	April 28, 2014		
		Signature of Attorney for Debtor  Brad Olson	(S) (Date)		
	Exh	ibit C			
Does the debto	or own or have possession of any property that poses or is alleged to	pose a threat of imminent and identifial	ble harm to public health or safety?		
☐ Yes, and ☐ No.	Exhibit C is attached and made a part of this petition.				
Exhibit  If this is a join	leted by every individual debtor. If a joint petition is filed, ead D completed and signed by the debtor is attached and made	a part of this petition.	n a separate Exhibit D.)		
	Information Regardin (Check any ap	=			
•	Debtor has been domiciled or has had a residence, principal days immediately preceding the date of this petition or for	al place of business, or principal as	sets in this District for 180		
	There is a bankruptcy case concerning debtor's affiliate, ge				
	Debtor is a debtor in a foreign proceeding and has its prince this District, or has no principal place of business or assets proceeding [in a federal or state court] in this District, or the sought in this District.	in the United States but is a defend	dant in an action or		
	Certification by a Debtor Who Reside (Check all app		erty		
	Landlord has a judgment against the debtor for possession	of debtor's residence. (If box checke	d, complete the following.)		
	(Name of landlord that obtained judgment)	<u></u>			
	(Address of landlord)				
	Debtor claims that under applicable nonbankruptcy law, the entire monetary default that gave rise to the judgment f				
	Debtor has included with this petition the deposit with the after the filing of the petition.	court of any rent that would becom	e due during the 30-day period		
	Debtor certifies that he/she has served the Landlord with the	nis certification. (11 U.S.C. § 362(I)	)).		

B1 (Official Form 1)(04/13) Page 3

# **Voluntary Petition**

(This page must be completed and filed in every case)

# Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

## X /s/ Jennifer N. Norris

Signature of Debtor Jennifer N. Norris

X.

Signature of Joint Debtor

Telephone Number (If not represented by attorney)

April 28, 2014

Date

## Signature of Attorney\*

### X /s/ Brad Olson

Signature of Attorney for Debtor(s)

#### **Brad Olson**

Printed Name of Attorney for Debtor(s)

## LAW OFFICE OF BRAD OLSON

Firm Name

144 SOUTH DIVISION CARTERVILLE, IL 62918

Address

# Email: bradolson@bradolsonlaw.com 618-985-5262 Fax: 618-985-5962

Telephone Number

April 28, 2014

Date

\*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

## Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

Name of Debtor(s):

Norris, Jennifer N.

### Signatures

### Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

- ☐ I request relief in accordance with chapter 15 of title 11. United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.
- ☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

X

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

# Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

v	

Date

Address

Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. §110; 18 U.S.C. §156.

B 1D (Official Form 1, Exhibit D) (12/09)

# **United States Bankruptcy Court** Southern District of Illinois

In re	Jennifer N. Norris		Case No.	
		Debtor(s)	Chapter	7

# EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- ■1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*
- □3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.] \_\_\_\_

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

□4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]

B 1D (Official Form 1, Exhibit D) (12/09) - Cont.

Page 2

□Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);

Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);

□Active military duty in a military combat zone.

□5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

Signature of Debtor: /s/ Jennifer N. Norris

Jennifer N. Norris

Date: April 28, 2014

B 6 Summary (Official Form 6 - Summary) (12/13)

# **United States Bankruptcy Court**Southern District of Illinois

In re	Jennifer N. Norris		Case No.	
-		Debtor		
			Chapter	7

# **SUMMARY OF SCHEDULES**

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	22,500.00		
B - Personal Property	Yes	3	14,770.00		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	1		51,223.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	1		0.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	6		76,920.00	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	2			1,495.00
J - Current Expenditures of Individual Debtor(s)	Yes	2			1,795.00
Total Number of Sheets of ALL Schedules		19			
	To	otal Assets	37,270.00		
			Total Liabilities	128,143.00	

B 6 Summary (Official Form 6 - Summary) (12/13)

# **United States Bankruptcy Court** Southern District of Illinois

In re	Jennifer N. Norris		Case No		
		Debtor	,		
			Chapter	7	

# STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C.§ 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	0.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	0.00
Student Loan Obligations (from Schedule F)	0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	0.00
TOTAL	0.00

## State the following:

Average Income (from Schedule I, Line 12)	1,495.00
Average Expenses (from Schedule J, Line 22)	1,795.00
Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20)	1,495.00

### State the following:

Total from Schedule D, "UNSECURED PORTION, IF ANY"     column		0.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column	0.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		0.00
4. Total from Schedule F		76,920.00
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		76,920.00

# Case 14-40461-lkg Doc 1 Filed 04/28/14 Page 8 of 52

B6A (Official Form 6A) (12/07)

In re	Jennifer N. Norris	Case No	
_			
		Debtor	

## **SCHEDULE A - REAL PROPERTY**

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Residence: two bedroom, one bath, 1900 suqare		J	22,500.00	35,648.00
Description and Location of Property	Nature of Debtor's Interest in Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption	Amount of Secured Claim

foot home on one city lot. Location: 207 West 12th, Johnston City IL 62951 joint with ex-husband total value \$45,000

Sub-Total > 22,500.00 (Total of this page)

Total > **22,500.00** 

**0** continuation sheets attached to the Schedule of Real Property

(Report also on Summary of Schedules)

B6B (Official Form 6B) (12/07)

In re	Jennifer N. Norris	Case No	
		Dahtar	

## SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

	Type of Property	N O Description and Location of Property E	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
1.	Cash on hand	currency	J	5.00
2.	Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and	USAA checking \$80 savings \$80	J	160.00
	homestead associations, or credit unions, brokerage houses, or cooperatives.	SIU-CU savings	J	5.00
3.	Security deposits with public utilities, telephone companies, landlords, and others.	X		
4.	Household goods and furnishings, including audio, video, and computer equipment.	furniture \$400; tv/dvd \$150; computer \$50; washer/dryer \$400; refrigerator \$200; kitchen good \$100	J s	1,300.00
5.	Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	x		
6.	Wearing apparel.	misc. wearing apparel	J	200.00
7.	Furs and jewelry.	wedding band	J	1,000.00
8.	Firearms and sports, photographic, and other hobby equipment.	x		
9.	Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	x		
10.	Annuities. Itemize and name each issuer.	x		

2 continuation sheets attached to the Schedule of Personal Property

2,670.00

Sub-Total >

(Total of this page)

In re	Jennifer N. Norris	Case No.	_

Debtor

# SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property without Deducting any Secured Claim or Exemption
11.	Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X			
12.	Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	X			
13.	Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14.	Interests in partnerships or joint ventures. Itemize.	X			
15.	Government and corporate bonds and other negotiable and nonnegotiable instruments.	X			
16.	Accounts receivable.	x			
17.	Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X			
18.	Other liquidated debts owed to debtor including tax refunds. Give particulars.	X			
19.	Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20.	Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
21.	Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X			
			(T	Sub-Toto otal of this page)	al > <b>0.00</b>

Sheet <u>1</u> of <u>2</u> continuation sheets attached to the Schedule of Personal Property

In re	Jennifer N. Norris	Case No

Debtor

# **SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

	Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
22.	Patents, copyrights, and other intellectual property. Give particulars.	х			
23.	Licenses, franchises, and other general intangibles. Give particulars.	X			
24.	Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25.	Automobiles, trucks, trailers, and other vehicles and accessories.		2011 Subaru WRX 50K miles joint with Mark Norris	J	9,000.00
			2004 Mazda 6 140,000 miles needs body work	-	3,000.00
26.	Boats, motors, and accessories.	X			
27.	Aircraft and accessories.	X			
28.	Office equipment, furnishings, and supplies.	X			
29.	Machinery, fixtures, equipment, and supplies used in business.	X			
30.	Inventory.	X			
31.	Animals.		1 dog	-	0.00
32.	Crops - growing or harvested. Give particulars.	X			
33.	Farming equipment and implements.	X			
34.	Farm supplies, chemicals, and feed.	X			
35.	Other personal property of any kind not already listed. Itemize.		misc. hand tools and shop equipment	J	100.00
				Sub-Tota	al > 12,100.00

| Sub-Total > | 12,100.00 | | (Total of this page) | Total > | 14,770.00 |

Sheet **2** of **2** continuation sheets attached to the Schedule of Personal Property

(Report also on Summary of Schedules)

B6C (Official Form 6C) (4/13)

In re	Jennifer N. Norris	Case No

Debtor

# SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled (Check one box)  ☐ 11 U.S.C. §522(b)(2)  ☐ 11 U.S.C. §522(b)(3)	\$155,675. (A	otor claims a homestead exe mount subject to adjustment on 4/1. with respect to cases commenced on	/16, and every three years thereaft
Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
Real Property Residence: two bedroom, one bath, 1900 suqare foot home on one city lot. Location: 207 West 12th, Johnston City IL 62951 joint with ex-husband total value \$45,000	735 ILCS 5/12-901	15,000.00	45,000.00
<u>Cash on Hand</u> currency	735 ILCS 5/12-1001(b)	5.00	5.00
Checking, Savings, or Other Financial Accounts, OUSAA checking \$80 savings \$80	Certificates of Deposit 735 ILCS 5/12-1001(b)	160.00	160.00
SIU-CU savings	735 ILCS 5/12-1001(b)	5.00	5.00
Household Goods and Furnishings furniture \$400; tv/dvd \$150; computer \$50; washer/dryer \$400; refrigerator \$200; kitchen goods \$100	735 ILCS 5/12-1001(b)	1,300.00	1,300.00
Wearing Apparel misc. wearing apparel	735 ILCS 5/12-1001(a)	200.00	200.00
Furs and Jewelry wedding band	735 ILCS 5/12-1001(a)	1,000.00	1,000.00
Automobiles, Trucks, Trailers, and Other Vehicles 2011 Subaru WRX 50K miles joint with Mark Norris	735 ILCS 5/12-1001(c)	183.00	18,000.00
2004 Mazda 6 140,000 miles needs body work	735 ILCS 5/12-1001(c) 735 ILCS 5/12-1001(b)	2,400.00 600.00	3,000.00
Other Personal Property of Any Kind Not Already misc. hand tools and shop equipment	<u>Listed</u> 735 ILCS 5/12-1001(b)	100.00	100.00

Total:	20.953.00	68.770.00

B6D (Official Form 6D) (12/07)

In re	Jennifer N. Norris	Case No.	
-		Debtor	

## SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Unliquidated". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C C D E B T C R	J M H	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGEN	L Q	S	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No.  Chase Auto Finance P.O. Box 9001083 Louisville, KY 40290	x	J	2011 Subaru WRX 50K miles joint with Mark Norris	T	T E D		15,575.00	0.00
Account No.  US Bank Home Mortgage PO Box 790415 Saint Louis, MO 63179	×	J	Residence: two bedroom, one bath, 1900 sugare foot home on one city lot. Location: 207 West 12th, Johnston City IL 62951 joint with ex-husband total value \$45,000					
Account No.			Value \$ 45,000.00  Value \$				35,648.00	0.00
Account No.			Value \$					
continuation sheets attached		1		Sub his			51,223.00	0.00
			(Report on Summary of So		ota lule		51,223.00	0.00

B6E (Official Form 6E) (4/13)

•			
In re	Jennifer N. Norris	Case No	
_		Debtor ,	

## SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts <u>not</u> entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

total also on the Statistical Summary of Certain Elabinities and Related Data.
■ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.
TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)
☐ Domestic support obligations
Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relation of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).
☐ Extensions of credit in an involuntary case
Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of trustee or the order for relief. 11 U.S.C. § 507(a)(3).
☐ Wages, salaries, and commissions
Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sale representatives up to \$12,475* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).
☐ Contributions to employee benefit plans
Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of busine whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).
☐ Certain farmers and fishermen
Claims of certain farmers and fishermen, up to \$6,150* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).
☐ Deposits by individuals
Claims of individuals up to \$2,775* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).
☐ Taxes and certain other debts owed to governmental units
Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).
☐ Commitments to maintain the capital of an insured depository institution
Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federa Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).
☐ Claims for death or personal injury while debtor was intoxicated
Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

**0** continuation sheets attached

<sup>\*</sup> Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

B6F (Official Form 6F) (12/07)

In re	Jennifer N. Norris	Case No
_		Debtor

# SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME,	СО	Hus	sband, Wife, Joint, or Community	Ç	Ų	D	7	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	ОДШВТОК	T S J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGEN	Q U I	SPUTED		AMOUNT OF CLAIM
Account No.			repossession of 2013 Chrysler 300	Ĭ	TED		Ī	
Ally PO Box 9001951 Louisville, KY 40290-1951		J			<u> </u>			28,112.00
Account No.			credit card	T		T	T	
American Eagle		J						
								300.00
Account No.			credit card				1	
American Express PO Box 360001 Fort Lauderdale, FL 33336-0001		ı						
								5,500.00
Account No.  American Express PO Box 360001 Fort Lauderdale, FL 33336-0001		-	USAA card					4,500.00
_5 continuation sheets attached			(Total of t	Subt				38,412.00

In re	Jennifer N. Norris	Case No	
_		Debtor ,	

	C	Н	sband, Wife, Joint, or Community	10	ш	D	Ι
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTLNGEN	l Q	SPUTED	AMOUNT OF CLAIM
Account No.			service	٦т	E		
AT&T Mobility PO Box 6416 Carol Stream, IL 60197-6416		-			D		1,000.00
Account No.	t		credit card	+			
Barclay Bank 700 Prides Xing Newark, DE 19713		J					2 000 00
Account No.	-		credit card	$\perp$	-		3,000.00
Best Buy P.O. Box 9312 Minneapolis, MN 55440		J					2,500.00
Account No.			credit card	+			,
Capital One P.O. Box 6492 Carol Stream, IL 60197		-					3,000.00
Account No.	╁		health care	+			3,000.00
Care First Medical Center 3307 Broadway Suite 140 Mount Vernon, IL 62864-2397		-					169.00
Sheet no. <u>1</u> of <u>5</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims		_	(Total o	Sub			9,669.00

In re	Jennifer N. Norris	Case No.	
_		Debtor	

CDEDITORICALANT	С	Hu	sband, Wife, Joint, or Community	С	U	D	
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C A H	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	_ E N	UNLIQUIDATED	I S P U T E D	AMOUNT OF CLAIM
Account No.			credit card	٦	T E		
Citibank PO Box 6077 Sioux Falls, SD 57117-6077		J			D		2,000.00
Account No.		_	assignee Hearltand Women's Healthcare				
Consumer Collections P.O. Box 1839 Maryland Heights, MO 63043		-					0.00
Account No.	+		attorney for Personal Fin.	+			0.00
Euginia Hunter Attorney at Law 905 W. Cherry Carbondale, IL 62901		-					0.00
Account No.		$\vdash$	2013 Kawasaki Nija 650R	+			
GE Capital PO Box 960061 Orlando, FL 32896-0061		J					7,100.00
Account No.	╁	$\vdash$	credit card		_		7,100.00
GE Capital PO Box 960061 Orlando, FL 32896-0061		J					7,100.00
Sheet no. <b>2</b> of <b>5</b> sheets attached to Schedule or	f		L	Sub	L tota	ll	16,200.00

In re	Jennifer N. Norris	Case No	
_		Debtor ,	

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above)  C Husband, Wife, Joint, or Community  D H W CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.  C U D O N I N L S T I P I Q U U D O N I S V I S C I S SUBJECT TO SETOFF, SO STATE.									
CREDITOR'S NAME,	C	Hu	sband, Wife, Joint, or Community	ļç	U	D			
MAILING ADDRESS	CODEBTO	Н	DATE CLARAWA CHICUDDED AND	Ň	Ľ	s			
INCLUDING ZIP CODE,	B	w	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM	H	Q	Ü			
AND ACCOUNT NUMBER	T	C	IS SUBJECT TO SETOFF, SO STATE.	N	U	F	AMOUNT OF CLAIM		
(See instructions above.)	Ř			CONTINGENT	D A	D			
Account No.			day care	Ť	.DATED				
	1			L	D				
Heartland Kids									
3902 Ernestine Dr.		-							
Marion, IL 62959									
							1,254.00		
Account No.			health care						
Heartland Women's Healthcare									
3408 Office Park Dr		-							
Marion, IL 62959									
							044.00		
							314.00		
Account No.			credit card						
Home Depot									
Processing Center		-							
Des Moines, IA 50364									
							2,659.00		
Account No.			medical						
Marion Diagnostic Center									
3003 Civic Circle Blvd		-							
Marion, IL 62959									
							60.00		
Account No.	]		credit card						
Menards				1					
P.O. Box 17602		-		1					
Baltimore, MD 21297	l			1					
							1,827.00		
Sheet no. 3 of 5 sheets attached to Schedule of				Subt	ota	.1			
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pag	e)	6,114.00		

In re	Jennifer N. Norris	Case No.	
_		Debtor	

					_		
CREDITOR'S NAME,	000		usband, Wife, Joint, or Community	0.0	U N	DI	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C A H		COXH-ZGEZH	021-00-04	I S P U T E D	AMOUNT OF CLAIM
Account No.			credit card	Ť	DATED		
Morse		J			D		270.00
Account No.	L	_	credit card	<u> </u>			370.00
Old Navy P.O. Box 530942 Atlanta, GA 30353		J	credit card				
							200.00
Account No.			medical	T			
Orthopaedic Institute P.O. Box 550 Energy, IL 62933-0550		-					
							1,706.00
Account No.		T	cash loan	T			
Personal Finance Company PO Box 1782 Marion, IL 62959		J					
A count No	_	_	acciones untracum	<u> </u>			3,174.00
Account No.  Professional Finance Co PO Box 1686 Greeley, CO 80632-1686		_	assignee unknown				475.00
Sheet no. 4 of 5 sheets attached to Schedule of				Subt			5,925.00
Creditors Holding Unsecured Nonpriority Claims			(Total of t	nis j	pag	ge)	· · · · · · · · · · · · · · · · · · ·

T	lammifan N. Namia	C N-	
In re	Jennifer N. Norris	Case No	
_		;	
		Debtor	

	_	_		_			
CREDITOR'S NAME,	CODEBTOR	l	sband, Wife, Joint, or Community		U N	D	
MAILING ADDRESS	D E	H W	DATE CLAIM WAS INCURRED AND	N T	L	S P	
INCLUDING ZIP CODE, AND ACCOUNT NUMBER	ВТ	J	CONSIDERATION FOR CLAIM. IF CLAIM	I N	Q	U	AMOUNT OF CLAIM
(See instructions above.)	O R	С	IS SUBJECT TO SETOFF, SO STATE.	Ğ	Ĭ	Ė	AMOUNT OF CEARIN
A	Ë		anadit aand	CONTINGENT	Ā	DISPUTED	
Account No.			credit card	Ι΄	Ė		
Walmart					۲	H	1
P.O. Box 530927		J					
Atlanta, GA 30353		ľ					
Allalla, OA 00000							
							600.00
	L			╄	┞	┡	333.33
Account No.							
				上			
Account No.							
				L			
Account No.							
				L			
Account No.							
				L			
Sheet no. <u>5</u> of <u>5</u> sheets attached to Schedule of			S	Subt	tota	ıl	000.00
Creditors Holding Unsecured Nonpriority Claims			(Total of the	nis	pag	ge)	600.00
				Т	Γota	al	
			(Report on Summary of Sc				76,920.00
			(respond on building of be			,	

# Case 14-40461-lkg Doc 1 Filed 04/28/14 Page 21 of 52

B6G (Official Form 6G) (12/07)

In re Jennifer N. Norris Case No	
In re Jennifer N. Norris Case No	
Debtor	

# SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

■ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.

# Case 14-40461-lkg Doc 1 Filed 04/28/14 Page 22 of 52

B6H (Official Form 6H) (12/07)

In re	Jennifer N. Norris		Case No	
		, Debtor		

## **SCHEDULE H - CODEBTORS**

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☐ Check this box if debtor has no codebtors.

Mark Norris
Zor W. 12th
Johnston City, IL 62951

NAME AND ADDRESS OF CREDITOR

Chase Auto Finance
P.O. Box 9001083
Louisville, KY 40290

US Bank Home Mortgage
PO Box 790415
Johnston City, IL 62951

Saint Louis, MO 63179

Fill	in this information to identify your	case:							
Del	btor 1 Jennifer N.	Norris							
_	btor 2 puse, if filing)				_				
Uni	ited States Bankruptcy Court for th	ne: SOUTHERN DISTRIC	CT OF ILLINOIS						
	se number nown)		-			Check if this is  An amend  A supplem  13 income	ed filing ent showin	g post-petitior ollowing date:	n chapter
0	fficial Form B 6I					MM / DD/	YYYY		
S	chedule I: Your Ind	come							12/13
spo atta	plying correct information. If you are separated and you have a separated and youch a separate sheet to this form the separate sheet s	our spouse is not filing w . On the top of any addit	rith you, do not inclu	de infor	mati	on about your sp	ouse. If m	ore space is	needed,
1.	Fill in your employment information.		Debtor 1			Debtor	2 or non-fi	ling spouse	
	If you have more than one job, attach a separate page with information about additional	Employment status	□Employed ■Not employed			□Emplo □Not er	•		
	employers.	Occupation							
	Include part-time, seasonal, or self-employed work.	Employer's name							
	Occupation may include student or homemaker, if it applies.	Employer's address							
		How long employed t	here?						
Pai	rt 2: Give Details About Mo	onthly Income							
	imate monthly income as of the use unless you are separated.	date you file this form. If	you have nothing to r	eport for	any	line, write \$0 in th	e space. In	clude your no	n-filing
•	ou or your non-filing spouse have r e space, attach a separate sheet t		ombine the informatio	n for all	empl	oyers for that pers	on on the I	ines below. If	you need
						For Debtor 1		otor 2 or ng spouse	
2.	List monthly gross wages, sal deductions). If not paid monthly			2.	\$	0.00	\$	N/A	
3.	Estimate and list monthly ove	rtime pay.		3.	+\$	0.00	+\$	N/A	
4.	Calculate gross Income. Add	line 2 + line 3.		4.	\$	0.00	\$	N/A	

Debt	or 1	Jennifer N. Norris		Case n	number (if known)			
	Con	by line 4 here	4.	For I	Debtor 1 0.00	For Debto		
_	-			<b>'</b> —	0.00		1973	
5.	5a. 5b. 5c.	all payroll deductions:  Tax, Medicare, and Social Security deductions  Mandatory contributions for retirement plans  Voluntary contributions for retirement plans	5a. 5b. 5c.	\$  \$	0.00 0.00 0.00	\$ \$ \$	N/A N/A N/A	
	5d. 5e. 5f. 5g. 5h.	Required repayments of retirement fund loans Insurance Domestic support obligations Union dues Other deductions. Specify:	5d. 5e. 5f. 5g. 5h.+	\$ \$ \$ \$	0.00 0.00 0.00 0.00	\$ \$ \$ \$ + \$	N/A N/A N/A N/A	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	0.00	\$	N/A	
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	0.00	\$	N/A	
8.	8b. 8c. 8d. 8e. 8f. 8g. 8h.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  Interest and dividends  Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  Unemployment compensation  Social Security  Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify: unemployment  Pension or retirement income  Other monthly income. Specify:	8a. 8b. 8c. 8d. 8e. 8f. 8g. 8h.+	\$ \$ \$ \$ \$ \$	0.00 0.00 0.00 0.00 0.00 1,495.00 0.00	\$ \$ \$ \$ \$ \$	N/A N/A N/A N/A N/A N/A	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	1,495.00	\$	N/A	
10.		culate monthly income. Add line 7 + line 9.  the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$_	1	,495.00 + \$_	N/A	<u>A</u> = \$ <u>2</u>	2,990.00
11.	Inclu othe	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not a cify:	depen	-	•			0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certainies					Combine monthly	
13.		you expect an increase or decrease within the year after you file this form?  No.  Yes. Explain:	?				monuny	
		100. Expiairi.						

E:11	in this information to identif	A NOR OCC				
				Chaal	if this is:	
Det	otor 1 Jennifer	N. Norris			amended filing	
Deb	otor 2				•	post-petition chapter 13
(Sp	ouse, if filing)				apenses as of the follo	
Uni	ited States Bankruptcy Court	for the: SOUTHERN DISTRICT OF ILL	LINOIS	]	MM / DD / YYYY	
Cas	se number			□A s	eparate filing for De	btor 2 because Debtor 2
(If l	known)				aintains a separate h	
_	001 1 1 7 7 7	-				
O	fficial Form B 6J	<u> </u>				
So	chedule J: Your	Expenses				12/13
		s possible. If two married people are filin				
	ormation. If more space is n known). Answer every ques	needed, attach another sheet to this form. tion.	On the top of any addition	nal pages,	write your name a	nd case number
Par	Is this a joint case?	isehold				
	No. Go to line 2.					
	Yes. Does Debtor 2 live	in a separate household?				
	□No	•				
	<del>_</del>	ust file a separate Schedule J.				
2.	Do you have dependents?	□No				
	-	_	5 1 4 14		<b>5</b> 1 4	D 1 1 1
	Do not list Debtor 1 and Debtor 2.	Yes. Fill out this information for	Dependent's relation Debtor 1 or Debtor 2	-	Dependent's age	Does dependent live with you?
	Do not state the dependents	each dependent				□No
	names.	3	son		2	Yes
						□No
						□Yes
						□No □Nos
			-			□Yes □No
						∐Yes
3.	Do your expenses include	110				
	expenses of people other to yourself and your depend					
	<u> </u>					
Par		going Monthly Expenses our bankruptcy filing date unless you ar		1	- Cht 12	4
		our bankrupicy filing date unless you ar bankruptcy is filed. If this is a supplemei				
app	plicable date.					
Inc	lude expenses paid for with	non-cash government assistance if you k	snow the value of			
suc	h assistance and have inclu	ded it on Schedule 1: Your Income (Offici	ial Form 6I.)		Your exp	enses
4.	The rental or home owne	rship expenses for your residence. Includ	e first mortgage payments			
	and any rent for the ground			4. \$		337.00
	If not included in line 4:					
				4. 6		0.00
	<ul><li>4a. Real estate taxes</li><li>4b. Property, homeowne</li></ul>	er's, or renter's insurance		4a. \$ 4b. \$		0.00 0.00
	* *	repair, and upkeep expenses		4c. \$		75.00
		iation or condominium dues		4d. \$		0.00

Additional mortgage payments for your residence, such as home equity loans

# Case 14-40461-lkg Doc 1 Filed 04/28/14 Page 26 of 52

electricity, heat, natural gas  Vater, sewer, garbage collection elephone, cell phone, Internet, satellite, and cable services wher. Specify: cell phone internet d housekeeping supplies re and children's education costs g, laundry, and dry cleaning I care products and services and dental expenses ortation. Include gas, maintenance, bus or train fare. include car payments. imment, clubs, recreation, newspapers, magazines, and books ble contributions and religious donations ce. include insurance deducted from your pay or included in lines 4 or 20. ife insurance fealth insurance	6a. 6b. 6c. 6d. 7. 8. 9. 10. 11. 12. 13. 14.	\$	300.00 65.00 0.00 45.00 32.00 300.00 0.00 150.00 100.00 50.00 125.00 75.00 0.00
lectricity, heat, natural gas Vater, sewer, garbage collection elephone, cell phone, Internet, satellite, and cable services other. Specify:  cell phone  nternet d housekeeping supplies re and children's education costs g, laundry, and dry cleaning I care products and services and dental expenses ortation. Include gas, maintenance, bus or train fare. nclude car payments. inment, clubs, recreation, newspapers, magazines, and books ble contributions and religious donations ce. nclude insurance deducted from your pay or included in lines 4 or 20. ife insurance fealth insurance	6b. 6c. 6d. 7. 8. 9. 10. 11. 12. 13. 14.	\$	65.00 0.00 45.00 32.00 300.00 0.00 150.00 100.00 50.00 125.00
Vater, sewer, garbage collection elephone, cell phone, Internet, satellite, and cable services where. Specify:  cell phone  nternet d housekeeping supplies re and children's education costs g, laundry, and dry cleaning I care products and services and dental expenses ortation. Include gas, maintenance, bus or train fare. include car payments. imment, clubs, recreation, newspapers, magazines, and books ble contributions and religious donations ce. include insurance deducted from your pay or included in lines 4 or 20. ife insurance fealth insurance	6c. 6d. 7. 8. 9. 10. 11. 12. 13.	\$	65.00 0.00 45.00 32.00 300.00 0.00 150.00 100.00 50.00 125.00
elephone, cell phone, Internet, satellite, and cable services other. Specify:  cell phone  nternet d housekeeping supplies re and children's education costs g, laundry, and dry cleaning I care products and services and dental expenses ortation. Include gas, maintenance, bus or train fare. include car payments. imment, clubs, recreation, newspapers, magazines, and books ble contributions and religious donations ce. include insurance deducted from your pay or included in lines 4 or 20. ife insurance fealth insurance	6d.  7. 8. 9. 10. 11. 12. 13.	\$	0.00 45.00 32.00 300.00 0.00 150.00 100.00 50.00 125.00
ther. Specify: cell phone  Internet	7. 8. 9. 10. 11. 12. 13.	\$	45.00 32.00 300.00 0.00 150.00 100.00 50.00 125.00
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d housekeeping supplies re and children's education costs g, laundry, and dry cleaning l care products and services and dental expenses ortation. Include gas, maintenance, bus or train fare. nelude car payments. inment, clubs, recreation, newspapers, magazines, and books ble contributions and religious donations ce. nelude insurance deducted from your pay or included in lines 4 or 20. ife insurance	8. 9. 10. 11. 12. 13.	\$	300.00 0.00 150.00 100.00 50.00 125.00
re and children's education costs g, laundry, and dry cleaning l care products and services and dental expenses ortation. Include gas, maintenance, bus or train fare. include car payments. inment, clubs, recreation, newspapers, magazines, and books ble contributions and religious donations ce. include insurance deducted from your pay or included in lines 4 or 20. ife insurance fealth insurance	8. 9. 10. 11. 12. 13.	\$	0.00 150.00 100.00 50.00 125.00
g, laundry, and dry cleaning I care products and services and dental expenses ortation. Include gas, maintenance, bus or train fare. include car payments. inment, clubs, recreation, newspapers, magazines, and books ble contributions and religious donations ce. include insurance deducted from your pay or included in lines 4 or 20. ife insurance ignored	9. 10. 11. 12. 13.	\$	150.00 100.00 50.00 125.00 75.00
and dental expenses  preservices and dental expenses  preservices and dental expenses  preservices and dental expenses  preservices and services are services and services are services and services are services and	10. 11. 12. 13. 14.	\$ \$ \$ \$	100.00 50.00 125.00 75.00
and dental expenses  pretation. Include gas, maintenance, bus or train fare. Include car payments. Intended, recreation, newspapers, magazines, and books Intended in the contributions and religious donations Include insurance deducted from your pay or included in lines 4 or 20. Include insurance Intended in surance Intended	11. 12. 13. 14.	\$	50.00 125.00 75.00
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nclude car payments. inment, clubs, recreation, newspapers, magazines, and books ble contributions and religious donations ce. nclude insurance deducted from your pay or included in lines 4 or 20. ife insurance iealth insurance	13. 14.	\$	75.00
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ble contributions and religious donations ce. nclude insurance deducted from your pay or included in lines 4 or 20. ife insurance lealth insurance		\$	
nclude insurance deducted from your pay or included in lines 4 or 20. ife insurance lealth insurance	15a.		
ife insurance fealth insurance	15a.		<del></del>
ealth insurance	15a.		
		\$	0.00
	15b.	\$	0.00
ehicle insurance	15c.	\$	121.00
ther insurance. Specify:	15d.	\$	0.00
Oo not include taxes deducted from your pay or included in lines 4 or 20.			
	16.	\$	0.00
* *		·	0.00
* *	17b.	\$	0.00
			0.00
		\$	0.00
		d.	0.00
• • •	18.		
· · · · · · · · · · · · · · · · · · ·		\$	0.00
			0.00
			0.00
			0.00
• •			0.00
			0.00
			0.00
pet care	21.	+\$	20.00
onthly expenses. Add lines 4 through 21.	22.	\$	1,795.00
te your monthly net income.		·	
opy line 12 (your combined monthly income) from Schedule I.	23a.	\$	1,495.00
opy your monthly expenses from line 22 above.	23b.	-\$	1,795.00
			· · · · · · · · · · · · · · · · · · ·
ubtract your monthly expenses from your monthly income.			200.00
	23c.	\$	-300.00
	ur pay on line 5, Schedule 1, Your Income (Official Form 6I).  ayments you make to support others who do not live with you.  eal property expenses not included in lines 4 or 5 of this form or on Schedule Intergages on other property eal estate taxes roperty, homeowner's, or renter's insurance Idintenance, repair, and upkeep expenses Idomeowner's association or condominium dues Expecify: pet care  onthly expenses. Add lines 4 through 21.  It is your monthly expenses. It your monthly expenses. It your monthly net income. It is your monthly expenses from line 22 above.  ubtract your monthly expenses from your monthly income.  the result is your monthly net income.  expect an increase or decrease in your expenses within the year after you	tent or lease payments: ar payments for Vehicle 1 ar payments for Vehicle 2 ther. Specify: ther.	ther. Specify:  tar payments for Vehicle 1  ar payments for Vehicle 2  ther. Specify:  tyments of alimony, maintenance, and support that you did not report as deducted ur pay on line 5, Schedule 1, Your Income (Official Form 61).  ayments you make to support others who do not live with you.  19.  teal property expenses not included in lines 4 or 5 of this form or on Schedule 1: Your Income.  Inco

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B6 Declaration (Official Form 6 - Declaration). (12/07)

# **United States Bankruptcy Court** Southern District of Illinois

In re	Jennifer N. Norris			Case No.			
			Debtor(s)	Chapter	7		
	<b>DECLARATION C</b>	ONCERN	ING DEBTOR'S S	CHEDUL	ES		
DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR							
	I declare under penalty of perjury the sheets, and that they are true and correct to the sheets.				les, consisting of		
Date _	April 28, 2014	Signature	/s/ Jennifer N. Norris Jennifer N. Norris				

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

# **United States Bankruptcy Court** Southern District of Illinois

In re	Jennifer N. Norris	ennifer N. Norris		
		Debtor(s)	Chapter	7

## STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

#### **DEFINITIONS**

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(2), (31).

## 1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE **\$62,073.00 2012** 

W-City of West Frankfort; Auto Credit

\$24,078.00 2013

W-Auto Credit \$24078

2

## 2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE **\$2,030.00 2013** 

W-unemployment

\$5,980.00 2014

W-Unemployment

## 3. Payments to creditors

# None

## Complete a. or b., as appropriate, and c.

a. *Individual or joint debtor(s) with primarily consumer debts:* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR Us Bank Home Mortgage PO Box 790415 Saint Louis, MO 63179	DATES OF PAYMENTS monthly \$317	AMOUNT PAID <b>\$951.00</b>	AMOUNT STILL OWING \$35,648.00
Chase Auto Finance P.O. Box 9001083 Louisville, KY 40290	monthly \$471	\$1,414.00	\$17,817.00

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$6,225\*. If the debtor is an individual, indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT
DATES OF PAID OR
PAYMENTS/ VALUE OF AMOUNT STILL
NAME AND ADDRESS OF CREDITOR TRANSFERS TRANSFERS OWING

None

c. *All debtors:* List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR DATE OF PAYMENT AMOUNT PAID OWING

<sup>\*</sup> Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

3

## 4. Suits and administrative proceedings, executions, garnishments and attachments

None

a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER Norris vs. Norris NATURE OF PROCEEDING dissolution of marriage COURT OR AGENCY AND LOCATION Williamson county, IL STATUS OR DISPOSITION judgment entered 2/14

None

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

DESCRIPTION AND VALUE OF PROPERTY

## 5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER

Ally PO Box 9001951 Louisville, KY 40290-1951 DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN 1/13

DESCRIPTION AND VALUE OF PROPERTY

repossession of 2013 Chrysler 300 mv: \$18,000

## 6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE

DATE OF ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

None

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN NAME AND LOCATION OF COURT CASE TITLE & NUMBER

DATE OF ORDER DESCRIPTION AND VALUE OF PROPERTY

7. Gifts

None

List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION

RELATIONSHIP TO DEBTOR, IF ANY

DATE OF GIFT

DESCRIPTION AND VALUE OF GIFT

4

### 8. Losses

None

List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case.** (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY

DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

### 9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE

LAW OFFICE OF BRAD OLSON 144 SOUTH DIVISION CARTERVILLE, IL 62918 DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR 2/14/14 AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

800.00

### 10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE,

DATE

DESCRIBE PROPERTY TRANSFERRED
AND VALUE RECEIVED

 $\label{eq:RELATIONSHIP} \textbf{TO DEBTOR} \\ \textbf{Unknown} \\$ 

1/2014

2006 Kawasaki 750cc four wheeler

\$800.00

unrelated

Aufenburg Herrin, IL 62948 unrelated 5/13

2010 Subaru Forrester and 2008 Dodge Ram

1500 for 2013 Chrysler 200

None

b. List all property transferred by the debtor within ten years immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER

DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST

IN PROPERTY

### 11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

5

## 12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY

NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS

DATE OF TRANSFER OR SURRENDER, IF ANY

#### 13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

#### 14. Property held for another person

None

List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER

DESCRIPTION AND VALUE OF PROPERTY

LOCATION OF PROPERTY

#### 15. Prior address of debtor

None

ADDRESS

If the debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

current 3550 West 24th Street Greeley, CO NAME USED same as on petition same as on petition

DATES OF OCCUPANCY 7/12-present

6/12-7/12

## 16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

### 17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

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B7 (Official Form 7) (04/13)

SITE NAME AND ADDRESS

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DATE OF NOTICE **ENVIRONMENTAL** 

NOTICE LAW

None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous

Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DATE OF NOTICE

**ENVIRONMENTAL** 

CE LAW

.,

one c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which

the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

### 18. Nature, location and name of business

None

a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN ADDRESS

NATURE OF BUSINESS

BEGINNING AND ENDING DATES

NAME

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

None

NAME ADDRESS

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within **six years** immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement **only** if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

### 19. Books, records and financial statements

None

a. List all bookkeepers and accountants who within **two years** immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

# NAME AND ADDRESS

## DATES SERVICES RENDERED

None b. List all firms or individuals who within the **two years** immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

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B7 (Official Form 7) (04/13)

NAME ADDRESS

DATES SERVICES RENDERED

DOLLAR AMOUNT OF INVENTORY

(Specify cost, market or other basis)

None c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME ADDRESS

None d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was

issued by the debtor within **two years** immediately preceding the commencement of this case.

INVENTORY SUPERVISOR

NAME AND ADDRESS DATE ISSUED

20. Inventories

None a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory,

and the dollar amount and basis of each inventory.

None b. List the name and address of the person having possession of the records of each of the inventories reported in a., above.

DATE OF INVENTORY

DATE OF INVENTORY

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY RECORDS

21. Current Partners, Officers, Directors and Shareholders

None a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS

None

NATURE OF INTEREST

PERCENTAGE OF INTEREST

None b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns,

controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NAME AND ADDRESS
TITLE
NATURE AND PERCENTAGE
OF STOCK OWNERSHIP

22. Former partners, officers, directors and shareholders

a. If the debtor is a partnership, list each member who withdrew from the partnership within one year immediately preceding the

commencement of this case.

NAME ADDRESS DATE OF WITHDRAWAL

None b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year** 

immediately preceding the commencement of this case.

NAME AND ADDRESS TITLE DATE OF TERMINATION

23. Withdrawals from a partnership or distributions by a corporation

None If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation

in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT, RELATIONSHIP TO DEBTOR

DATE AND PURPOSE OF WITHDRAWAL

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

8

# 24. Tax Consolidation Group.

None

If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

### 25. Pension Funds.

None

If the debtor is not an individual, list the name and federal taxpayer-identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

\*\*\*\*\*

## DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date April 28, 2014 Signature /s/ Jennifer N. Norris
Jennifer N. Norris
Debtor

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

B8 (Form 8) (12/08)

# **United States Bankruptcy Court**Southern District of Illinois

In re	Jennifer N. Norris			
•		Debtor(s)	Chapter	7

# CHAPTER 7 INDIVIDUAL DEBTOR'S STATEMENT OF INTENTION

**PART A -** Debts secured by property of the estate. (Part A must be fully completed for **EACH** debt which is secured by property of the estate. Attach additional pages if necessary.)

Property No. 1		]					
Creditor's Name: Chase Auto Finance		Describe Property Securing Debt: 2011 Subaru WRX 50K miles joint with Mark Norris					
Property will be (check one):							
■Surrendered	□Retained						
If retaining the property, I intend to (check at le	ast one):						
☐Redeem the property							
☐Reaffirm the debt							
□Other. Explain	— ··· · · · · · · · · · · · · · · · · ·						
Property is (check one):							
☐Claimed as Exempt		■Not claimed as exempt					

Property No. 2		•	Page 2
Creditor's Name: US Bank Home Mortgage		on one city lot.	room, one bath, 1900 suqare foot home  12th, Johnston City IL 62951
Property will be (check one):			
□Surrendered	Retained		
If retaining the property, I intend to  □Redeem the property  ■Reaffirm the debt  □Other. Explain		d lien using 11 U.S.C.	§ 522(f)).
Property is (check one):			
Claimed as Exempt		□Not claimed as exe	mpt
<b>PART B</b> - Personal property subject Attach additional pages if necessary.		columns of Part B mu	st be completed for each unexpired lease.
Dronarty No. 1			
Property No. 1			
Property No. 1  Lessor's Name: -NONE-	Describe Leased Pro	operty:	Lease will be Assumed pursuant to 11 U.S.C. § 365(p)(2):  ☐ YES ☐ NO

### United States Bankruptcy Court Southern District of Illinois

In	re Jennifer N. Norris		Case No		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPI	ENSATION OF ATTO	RNEY FOR D	EBTOR(S)	
1.	Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2 compensation paid to me within one year before the fill be rendered on behalf of the debtor(s) in contemplation	ing of the petition in bankruptcy	, or agreed to be pai	d to me, for services rend	ered or to
				800.00	
	Prior to the filing of this statement I have received	d	\$	800.00	
	Balance Due		\$	0.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed con	npensation with any other person	unless they are men	mbers and associates of m	ıy law firm.
	☐ I have agreed to share the above-disclosed comper copy of the agreement, together with a list of the n				firm. A
5.	In return for the above-disclosed fee, I have agreed to	render legal service for all aspec	ts of the bankruptcy	case, including:	
	<ul> <li>a. Analysis of the debtor's financial situation, and ren</li> <li>b. Preparation and filing of any petition, schedules, st</li> <li>c. Representation of the debtor at the meeting of cred</li> <li>d. [Other provisions as needed]</li> <li>Negotiations with secured creditors to reaffirmation agreements and applicate 522(f)(2)(A) for avoidance of liens on h</li> </ul>	atement of affairs and plan which itors and confirmation hearing, a reduce to market value; ex ions as needed; preparation	n may be required; nd any adjourned he emption planning	earings thereof;	ng of
5.	By agreement with the debtor(s), the above-disclosed to Representation of the debtors in any of any other adversary proceeding.	ee does not include the following lischargeability actions, jud	g service: icial lien avoidan	ces, relief from stay a	ections or
		CERTIFICATION			
this	I certify that the foregoing is a complete statement of a s bankruptcy proceeding.	ny agreement or arrangement for	payment to me for	representation of the debt	tor(s) in
Dat	ted: <b>April 28, 2014</b>	/s/ Brad Olson			
		Brad Olson LAW OFFICE OF	BBVD OI SON		
		144 SOUTH DIVIS			
		CARTERVILLE, I	L 62918		
		618-985-5262 Fa bradolson@brad			
		มเสนบเอบเเษยเสน	CISCINAW.COIII		

## UNITED STATES BANKRUPTCY COURT SOUTHERN DISTRICT OF ILLINOIS

## NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

#### 1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days before the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

#### 2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

#### Chapter 7: Liquidation (\$245 filing fee, \$46 administrative fee, \$15 trustee surcharge: Total Fee \$306)

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

## <u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$46 administrative fee: Total fee \$281)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over

Page 2

a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

#### Chapter 11: Reorganization (\$1,167 filing fee, \$46 administrative fee: Total fee \$1,213)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

#### Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$46 administrative fee: Total fee \$246)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

#### 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

**WARNING:** Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.

B 201B (Form 201B) (12/09)

# United States Bankruntcy Court

	thern District of Illinois	
In re Jennifer N. Norris	Case No.	·
	Debtor(s) Chapter	7
	NOTICE TO CONSUMER DEBTO OF THE BANKRUPTCY CODE	OR(S)
$\Gamma$ I (We), the debtor(s), affirm that I (we) have recode.	ertification of Debtor ceived and read the attached notice, as require	ed by § 342(b) of the Bankruptcy
Jennifer N. Norris	$\chi$ /s/ Jennifer N. Norris	April 28, 2014
Printed Name(s) of Debtor(s)	Signature of Debtor	Date
Case No. (if known)	X	
	Signature of Joint Debtor (if a	ny) Date

Instructions: Attach a copy of Form B 201 A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C.  $\S$  342(b) only if the certification has NOT been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

### United States Bankruptcy Court Southern District of Illinois

n re	Jennifer N. Norris		Case No.	
		Debtor(s)	Chapter 7	
		VERIFICATION OF CREDITOR MA	ΓRIX	
		Debtor(s) hereby verify that the attached		
	schedules.	ur knowledge and that it corresponds to	the creditors fisted in my/	our
<b>N</b> oto:	April 28, 2014	/s/ Jennifer N. Norris		
Date:	Αρι ΙΙ 20, 2014	Jennifer N. Norris		
		Signature of Debtor		

Ally PO Box 9001951 Louisville, KY 40290-1951

American Eagle

American Express PO Box 360001 Fort Lauderdale, FL 33336-0001

AT&T Mobility PO Box 6416 Carol Stream, IL 60197-6416

Barclay Bank 700 Prides Xing Newark, DE 19713

Best Buy P.O. Box 9312 Minneapolis, MN 55440

Capital One P.O. Box 6492 Carol Stream, IL 60197

Care First Medical Center 3307 Broadway Suite 140 Mount Vernon, IL 62864-2397

Chase Auto Finance P.O. Box 9001083 Louisville, KY 40290

Citibank PO Box 6077 Sioux Falls, SD 57117-6077

Consumer Collections P.O. Box 1839 Maryland Heights, MO 63043 Euginia Hunter Attorney at Law 905 W. Cherry Carbondale, IL 62901

GE Capital PO Box 960061 Orlando, FL 32896-0061

Heartland Kids 3902 Ernestine Dr. Marion, IL 62959

Heartland Women's Healthcare 3408 Office Park Dr Marion, IL 62959

Home Depot Processing Center Des Moines, IA 50364

Marion Diagnostic Center 3003 Civic Circle Blvd Marion, IL 62959

Mark Norris 207 W. 12th Johnston City, IL 62951

Menards P.O. Box 17602 Baltimore, MD 21297

Morse

Old Navy P.O. Box 530942 Atlanta, GA 30353

Orthopaedic Institute P.O. Box 550 Energy, IL 62933-0550

Personal Finance Company PO Box 1782 Marion, IL 62959

Professional Finance Co PO Box 1686 Greeley, CO 80632-1686

US Bank Home Mortgage PO Box 790415 Saint Louis, MO 63179

Walmart P.O. Box 530927 Atlanta, GA 30353

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B22A (Official Form 22A) (Chapter 7) (04/13)

In re Jennifer N. Norris	
Debtor(s) Case Number:	According to the information required to be entered on this statement (check one box as directed in Part I, III, or VI of this statement):
(If known)	☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐
	■The presumption does not arise.
	☐The presumption is temporarily inapplicable.

# CHAPTER 7 STATEMENT OF CURRENT MONTHLY INCOME AND MEANS-TEST CALCULATION

In addition to Schedules I and J, this statement must be completed by every individual chapter 7 debtor. If none of the exclusions in Part I applies, joint debtors may complete one statement only. If any of the exclusions in Part I applies, joint debtors should complete separate statements if they believe this is required by § 707(b)(2)(C).

D. A. L. L. W. M. D.V. A. D. MON. GONGLIN SED. DEDECONG				
	Part I. MILITARY AND NON-CONSUMER DEBTORS			
1A	<b>Disabled Veterans.</b> If you are a disabled veteran described in the Declaration in this Part IA, (1) check the box at the beginning of the Declaration, (2) check the box for "The presumption does not arise" at the top of this statement, and (3) complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.			
	□Declaration of Disabled Veteran. By checking this box, I declare under penalty of perjury that I am a disabled veteran (as defined in 38 U.S.C. § 3741(1)) whose indebtedness occurred primarily during a period in which I was on active duty (as defined in 10 U.S.C. § 101(d)(1)) or while I was performing a homeland defense activity (as defined in 32 U.S.C. §901(1)).			
1B	<b>Non-consumer Debtors.</b> If your debts are not primarily consumer debts, check the box below and complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.			
	Declaration of non-consumer debts. By checking this box, I declare that my debts are not primarily consumer debts.			
	Reservists and National Guard Members; active duty or homeland defense activity. Members of a reserve component of the Armed Forces and members of the National Guard who were called to active duty (as defined in 10 U.S.C. § 101(d)(1)) after September 11, 2001, for a period of at least 90 days, or who have performed homeland defense activity (as defined in 32 U.S.C. § 901(1)) for a period of at least 90 days, are excluded from all forms of means testing during the time of active duty or homeland defense activity and for 540 days thereafter (the "exclusion period"). If you qualify for this temporary exclusion, (1) check the appropriate boxes and complete any required information in the Declaration of Reservists and National Guard Members below, (2) check the box for "The presumption is temporarily inapplicable" at the top of this statement, and (3) complete the verification in Part VIII. During your exclusion period you are not required to complete the balance of this form, but you must complete the form no later than 14 days after the date on which your exclusion period ends, unless the time for filing a motion raising the means test presumption expires in your case before your exclusion period ends.			
1C	Declaration of Reservists and National Guard Members. By checking this box and making the appropriate entries below, I declare that I am eligible for a temporary exclusion from means testing because, as a member of a reserve component of the Armed Forces or the National Guard			
	a.  was called to active duty after September 11, 2001, for a period of at least 90 days and remain on active duty /or/ was released from active duty on, which is less than 540 days before this bankruptcy case was filed;			
	OR			
	b.   am performing homeland defense activity for a period of at least 90 days /or/  performed homeland defense activity for a period of at least 90 days, terminating on, which is less than 540 days before this bankruptcy case was filed.			

		Part II. CALCULATION OF M	101	NTHLY INC	CON	ME FOR § 707(b)(	7) E	EXCLUSION		
	Marital/filing status. Check the box that applies and complete the balance of this part of this statement as directed.									
	a.	Unmarried. Complete only Column A ("D	ebto	r's Income'') fo	r Li	ines 3-11.				
2	b.									
	c. Married, not filing jointly, without the declaration of separate households set out in Line 2.b above. Complete both ("Debtor's Income") and Column B ("Spouse's Income") for Lines 3-11.							th (	Column A	
		Married, filing jointly. Complete both Colu					Spou	ise's Income'') fo	or I	ines 3-11.
	All fig	gures must reflect average monthly income r	eceiv	ed from all sou	rces	, derived during the six	Î	Column A		Column B
		dar months prior to filing the bankruptcy cas						Debtor's		Spouse's
		ling. If the amount of monthly income varie onth total by six, and enter the result on the			iths,	you must divide the		Income		Income
3		s wages, salary, tips, bonuses, overtime, co					\$	0.00	\$	
		ne from the operation of a business, profes			ract	I ine h from I ine a and	-		-	
		the difference in the appropriate column(s) of								
		ess, profession or farm, enter aggregate num								
		nter a number less than zero. Do not include	e any	part of the bu	sine	ess expenses entered on				
4	Line	b as a deduction in Part V.		Dobtor		Chouse	ı			
	a.	Gross receipts	\$	Debtor 0.	00	Spouse \$				
	b.	Ordinary and necessary business expenses	\$			\$				
	c.	Business income	<del></del>	btract Line b fr			\$	0.00	\$	
	Rent	and other real property income. Subtract	Line	b from Line a a	nd e	enter the difference in				
	the appropriate column(s) of Line 5. Do not enter a number less than zero. <b>Do not include any</b>									
_	part of the operating expenses entered on Line b as a deduction in Part V.					i				
5	l -	Construction	¢.	Debtor	00	Spouse				
	a. b.	Gross receipts Ordinary and necessary operating expenses	\$	0	.00 .00	\$				
	c.	Rent and other real property income		btract Line b from			\$	0.00	\$	
6	Intere	est, dividends, and royalties.	•				\$	0.00	\$	
7	Pensi	on and retirement income.					\$	0.00	\$	
<u> </u>		amounts paid by another person or entity,	on a	rogular basis	for	the household	Ψ	0.00	Ψ	
		uses of the debtor or the debtor's dependen								
8	purpo	ose. Do not include alimony or separate main	ntena	nce payments o	r an	nounts paid by your				
		e if Column B is completed. Each regular p					•	0.00	¢.	
		ayment is listed in Column A, do not report					\$	0.00	Þ	
		<b>nployment compensation.</b> Enter the amount ever, if you contend that unemployment com								
		it under the Social Security Act, do not list t								
9	or B,	but instead state the amount in the space bel	ow:							
		mployment compensation claimed to								
	be a	benefit under the Social Security Act Debte	or \$	0.00	Spo	ouse \$	\$	1,495.00	\$	
10	Income from all other sources. Specify source and amount. If necessary, list additional sources on a separate page. Do not include alimony or separate maintenance payments paid by your spouse if Column B is completed, but include all other payments of alimony or separate maintenance. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, crime against humanity, or as a victim of international or domestic terrorism.									
			¢	Debtor		Spouse				
	a. b.		\$			\$ \$				
		and enter on Line 10	Ψ	I		<u> </u>	<u>۴</u>	0.00	¢	
			L)/=	\	1	10: 01 4 1:	\$	0.00	Þ	
11		otal of Current Monthly Income for § 707( nn B is completed, add Lines 3 through 10 i					\$	1,495.00	\$	

12	Total Current Monthly Income for § 707(b)(7). If Column B has been completed, add Line 11, Column A to Line 11, Column B, and enter the total. If Column B has not been completed, enter the amount from Line 11, Column A.		1,495.00			
	Part III. APPLICATION OF § 707(b)(7) EXCLUSION	1				
13	number 12 and	\$	17,940.00			
14	Applicable median family income. Enter the median family income for the applicable state and household size.  (This information is available by family size at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)					
	a. Enter debtor's state of residence: L b. Enter debtor's household size:	2	\$	62,150.00		
Application of Section 707(b)(7). Check the applicable box and proceed as directed.  The amount on Line 13 is less than or equal to the amount on Line 14. Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete Part VIII; do not complete Parts IV, V, VI or VII.  The amount on Line 13 is more than the amount on Line 14. Complete the remaining parts of this statement.						

### Complete Parts IV, V, VI, and VII of this statement only if required. (See Line 15.)

Part IV. CALCULATION OF CURRENT MONTHLY INCOME FOR § 707(b)(2)						
16	Enter the amount from Line 12.				\$	
17	Marital adjustment. If you checked the box at Line 2.c Column B that was NOT paid on a regular basis for the dependents. Specify in the lines below the basis for excl spouse's tax liability or the spouse's support of persons of amount of income devoted to each purpose. If necessary not check box at Line 2.c, enter zero.  a.  b. c. d. Total and enter on Line 17	househouding the	old expenses of the debtor or the Column B income (such a the debtor or the debtor's of	the debtor's s payment of the dependents) and the	\$	
18	Current monthly income for § 707(b)(2). Subtract Lin	e 17 fro	om Line 16 and enter the resu	ılt.	\$	
	Part V. CALCULATION	OF D	EDUCTIONS FROM	INCOME		
	Subpart A: Deductions under Sta	andard	ls of the Internal Revenu	e Service (IRS)		
19A	National Standards: food, clothing and other items. Enter in Line 19A the "Total" amount from IRS National Standards for Food, Clothing and Other Items for the applicable number of persons. (This information is available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.) The applicable number of persons is the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support.					
19B	National Standards: health care. Enter in Line a1 below the amount from IRS National Standards for Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons 65 years of age or older. (This information is available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.) Enter in Line b1 the applicable number of persons who are under 65 years of age, and enter in Line b2 the applicable number of persons who are 65 years of age or older. (The applicable number of persons in each age category is the number in that category that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom					
	b1. Number of persons c1. Subtotal	b2.	Number of persons Subtotal		\$	
20A	Local Standards: housing and utilities; non-mortgage Utilities Standards; non-mortgage expenses for the appli available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the the number that would currently be allowed as exemptio any additional dependents whom you support.	e expense cable control	ses. Enter the amount of the punty and family size. (This ptcy court). The applicable fa	information is amily size consists of	\$	

20B	not enter an amount less than zero.						
	b.	IRS Housing and Utilities Standards; mortgage/rental expense Average Monthly Payment for any debts secured by your	\$				
	0.	home, if any, as stated in Line 42	\$				
	c.	Net mortgage/rental expense	Subtract Line b from Line a.	\$			
21	20B d Stand	<b>Standards: housing and utilities; adjustment.</b> If you contend loes not accurately compute the allowance to which you are entit ards, enter any additional amount to which you contend you are nation in the space below:	led under the IRS Housing and Utilities	\$			
	You a vehicl	Standards: transportation; vehicle operation/public transportation are entitled to an expense allowance in this category regardless of the and regardless of whether you use public transportation. It is the number of vehicles for which you pay the operating expense and as a contribution to your household expenses in Line 8.	whether you pay the expenses of operating a				
22A	☐0 If you Trans Stand	nt from IRS Local Standards: 'Operating Costs" amount from IRS Local applicable Metropolitan Statistical Area or r from the clerk of the bankruptcy court.)	\$				
22B	for a v you po Stand court.	\$					
23	Local you cl vehicl  I Enter, (avail Montl						
	a.	sult in Line 23. <b>Do not enter an amount less than zero.</b> IRS Transportation Standards, Ownership Costs	\$				
	u.	Average Monthly Payment for any debts secured by Vehicle					
	b.	1, as stated in Line 42	\$				
1	c.	Net ownership/lease expense for Vehicle 1	Subtract Line b from Line a.	\$			
24	the result in Line 24. <b>Do not enter an amount less than zero.</b>						
	a.	IRS Transportation Standards, Ownership Costs  Average Monthly Payment for any debts secured by Vehicle	\$				
	b.	2, as stated in Line 42	\$				
	c.	Net ownership/lease expense for Vehicle 2	Subtract Line b from Line a.	\$			
25	Other state a securi	\$					

26	Other Necessary Expenses: involuntary deductions for deductions that are required for your employment, such <b>Do not include discretionary amounts, such as volunt</b> .	as retirement contributions, union dues, and uniform costs.	\$			
27	Other Necessary Expenses: life insurance. Enter total life insurance for yourself. Do not include premiums for any other form of insurance.	average monthly premiums that you actually pay for term or insurance on your dependents, for whole life or for	\$			
28	Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations included in Line 44.					
29	the total average monthly amount that you actually expe	t or for a physically or mentally challenged child. Enter nd for education that is a condition of employment and for hallenged dependent child for whom no public education	\$			
30	Other Necessary Expenses: childcare. Enter the total childcare - such as baby-sitting, day care, nursery and pro-		\$			
31	Other Necessary Expenses: health care. Enter the total health care that is required for the health and welfare of insurance or paid by a health savings account, and that i include payments for health insurance or health savings.	yourself or your dependents, that is not reimbursed by s in excess of the amount entered in Line 19B. <b>Do not</b>	\$			
32	Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you					
33	Total Expenses Allowed under IRS Standards. Enter	the total of Lines 19 through 32.	\$			
		penses that you have listed in Lines 19-32 avings Account Expenses. List the monthly expenses in ply necessary for yourself, your spouse, or your				
34		Ф.				
	a. Health Insurance b. Disability Insurance	\$ \$				
	c. Health Savings Account	\$	\$			
	Total and enter on Line 34.	Ψ	Ψ			
		your actual total average monthly expenditures in the space				
35	Continued contributions to the care of household or family members. Enter the total average actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses.					
36	<b>Protection against family violence.</b> Enter the total average reasonably necessary monthly expenses that you					
37	Home energy costs. Enter the total average monthly amount, in excess of the allowance specified by IRS Local					
38	Education expenses for dependent children less than actually incur, not to exceed \$156.25* per child, for atter school by your dependent children less than 18 years of documentation of your actual expenses, and you must necessary and not already accounted for in the IRS S	ndance at a private or public elementary or secondary age. You must provide your case trustee with explain why the amount claimed is reasonable and	\$			

<sup>\*</sup> Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

39	Additional food and clothing expenexpenses exceed the combined allows Standards, not to exceed 5% of those or from the clerk of the bankruptcy coreasonable and necessary.	\$				
40		Enter the amount that you will contion organization as defined in 26 U.S.C. §			\$	
41	<b>Total Additional Expense Deductio</b>	ons under § 707(b). Enter the total of	Lines 34 thr	ough 40	\$	
		Subpart C: Deductions for De	bt Pavm	ent	'	
42	<b>Future payments on secured claims.</b> For each of your debts that is secured by an interest in property that you own, list the name of the creditor, identify the property securing the debt, state the Average Monthly Payment, and					
	Name of Creditor	Property Securing the Debt	Average	Monthly Does payment include taxes or insurance?		
	a.		\$	☐ es ☐ lo		
			Total: A	Add Lines	\$	
43	motor vehicle, or other property nece your deduction 1/60th of any amount payments listed in Line 42, in order t sums in default that must be paid in of the following chart. If necessary, list		f your depend the credito The cure and the List and	ndents, you may include in r in addition to the nount would include any total any such amounts in		
	Name of Creditor	Property Securing the Debt	\$	/60th of the Cure Amount		
	u.		Ψ	Total: Add Lines	\$	
44		aims. Enter the total amount, divided by claims, for which you were liable at the as those set out in Line 28.			\$	
		s. If you are eligible to file a case unde y the amount in line b, and enter the re				
45	a. Projected average monthly cl	hapter 13 plan payment.	\$			
45	issued by the Executive Office information is available at we the bankruptcy court.)	istrict as determined under schedules ce for United States Trustees. (This ww.usdoj.gov/ust/ or from the clerk of	x			
	c. Average monthly administrate	tive expense of chapter 13 case	Total: Mu	lltiply Lines a and b	\$	
46	<b>Total Deductions for Debt Payment</b>	t. Enter the total of Lines 42 through 4	5.		\$	
	S	Subpart D: Total Deductions i	rom Inco	ome		
47	Total of all deductions allowed under § 707(b)(2). Enter the total of Lines 33, 41, and 46.					
	Part VI. D	ETERMINATION OF § 707(	b)(2) PRI	ESUMPTION		
48	Enter the amount from Line 18 (Cu	arrent monthly income for § 707(b)(2	3))		\$	
49	Enter the amount from Line 47 (To	otal of all deductions allowed under §	707(b)(2))		\$	
50	Monthly disposable income under §	§ <b>707(b)(2).</b> Subtract Line 49 from Lin	e 48 and en	er the result.	\$	
51	60-month disposable income under result.	§ 707(b)(2). Multiply the amount in L	ine 50 by th	e number 60 and enter the	\$	

	Initial presumption determination. Check the applicable box and proceed as directed.		
52	☐The amount on Line 51 is less than \$7,475*. Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete the verification in Part VIII. Do not complete the remainder of Part VI.		
	☐The amount set forth on Line 51 is more than \$12,475* Check the box for "The presumption arises" at the top of page 1 of this statement, and complete the verification in Part VIII. You may also complete Part VII. Do not complete the remainder of Part VI.		
	☐ The amount on Line 51 is at least \$7,475*, but not more than \$12,475*. Complete the remainder of Part VI (Lines 53 through 55).		
53	Enter the amount of your total non-priority unsecured debt		\$
54	<b>Threshold debt payment amount.</b> Multiply the amount in Line 53 by the number 0.25 and enter the result.		\$
55	Secondary presumption determination. Check the applicable box and proceed as directed.		
	The amount on Line 51 is less than the amount on Line 54. Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete the verification in Part VIII.		
	☐ The amount on Line 51 is equal to or greater than the amount on Line 54. Check the box for "The presumption arises" at the top of page 1 of this statement, and complete the verification in Part VIII. You may also complete Part VII.		
	Part VII. ADDITIONAL EXPENSE	E CLAIMS	
56	<b>Other Expenses.</b> List and describe any monthly expenses, not otherwise stated in this form, that are required for the health and welfare o you and your family and that you contend should be an additional deduction from your current monthly income under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page. All figures should reflect your average monthly expense for each item. Total the expenses.		
	Expense Description	Monthly Amou	ınt
	a.	\$	
	b.	\$	
	c.	\$	
	d.	\$	
	Total: Add Lines a, b, c, and d	\$	
	Part VIII. VERIFICATIO	N	
57	I declare under penalty of perjury that the information provided in this statement is true and correct. (If this is a joint case, both debtors must sign.)		
	Date: April 28, 2014 Signate	Signature: /s/ Jennifer N. Norris	
		Jennifer N. Norris	
		(Deplor)	

<sup>\*</sup> Amounts are subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.